

**CITY OF COVINGTON****Community Development Department**

16720 SE 271st Street • Suite 100 • Covington, WA 98042

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www.covingtonwa.gov

A-100**COMMERCIAL BUILDING PERMIT APPLICATION****PROJECT ADDRESS:** _____**TENANT NAME:** _____**PARCEL NO.:** _____ **SUITE NO.** _____**FOR STAFF USE ONLY**

Permit Number: _____

Application Date: _____

PRIMARY CONTACT PERSON☐ Applicant

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

PROPERTY OWNER☐ Applicant

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

CONTRACTOR☐ Applicant

Company: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

State Contractor's License #: _____

UBI #: _____

ENGINEER☐ Applicant

Company: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

ARCHITECT☐ Applicant

Company: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

TENANT☐ Applicant

Company: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

Lender/Bond Issuer: _____

Address: _____

Phone: _____

PROJECT DESCRIPTION:**VALUATION: \$** _____**Type of Work:** ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Other: _____

Occupancy type		Zoning		Lot area	
Construction type		Building height		<input type="checkbox"/> Well <input type="checkbox"/> Water District:	
No. of dwelling units		No. of stories		<input type="checkbox"/> Septic <input type="checkbox"/> Sewer District:	

I **acknowledge** that an application for a permit for any proposed work that has not resulted in the issuance of a permit within 180 days of the date of filing shall be deemed to have been abandoned.

I **certify** that as a contractor I am currently registered and properly licensed as defined in RCW 18.27, or as a property owner, I am exempt from the requirements of the contractor registration and will do all my own work or use properly licensed subcontractors in connection with the work to be performed under this permit. I **certify** that I have read and examined this application and know the same to be true and correct, and that if any of the information provided is incorrect, the permit or approval may be revoked.

Applicant's Signature_____
Date